

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-35702
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. BW-013
7. Lease Name or Unit Agreement Name KTS Brine Well
8. Well Number 1
9. OGRID Number 21566
10. Pool name or Wildcat N/A

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well ☐ Gas Well ☒ Other **Brine**

2. Name of Operator

John R. Stearns dba Stearns

3. Address of Operator

HC 65 Box 988, Crossroads, NM 88114

4. Well Location

Unit Letter **P** : **200'** feet from the **South** line and **200'** feet from the **EAST** line

Section **27** Township **9 S** Range **35 E** NMPM **Lea** County **NM**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: ☐

OTHER: **MIT**

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Dec. 11, 2007 - Ran MIT with Carl Chavez

Chart Attached



I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE **John R. Stearns**

TITLE **OWNER**

DATE **12-17-07**

Type or print name **John R. Stearns**
For State Use Only

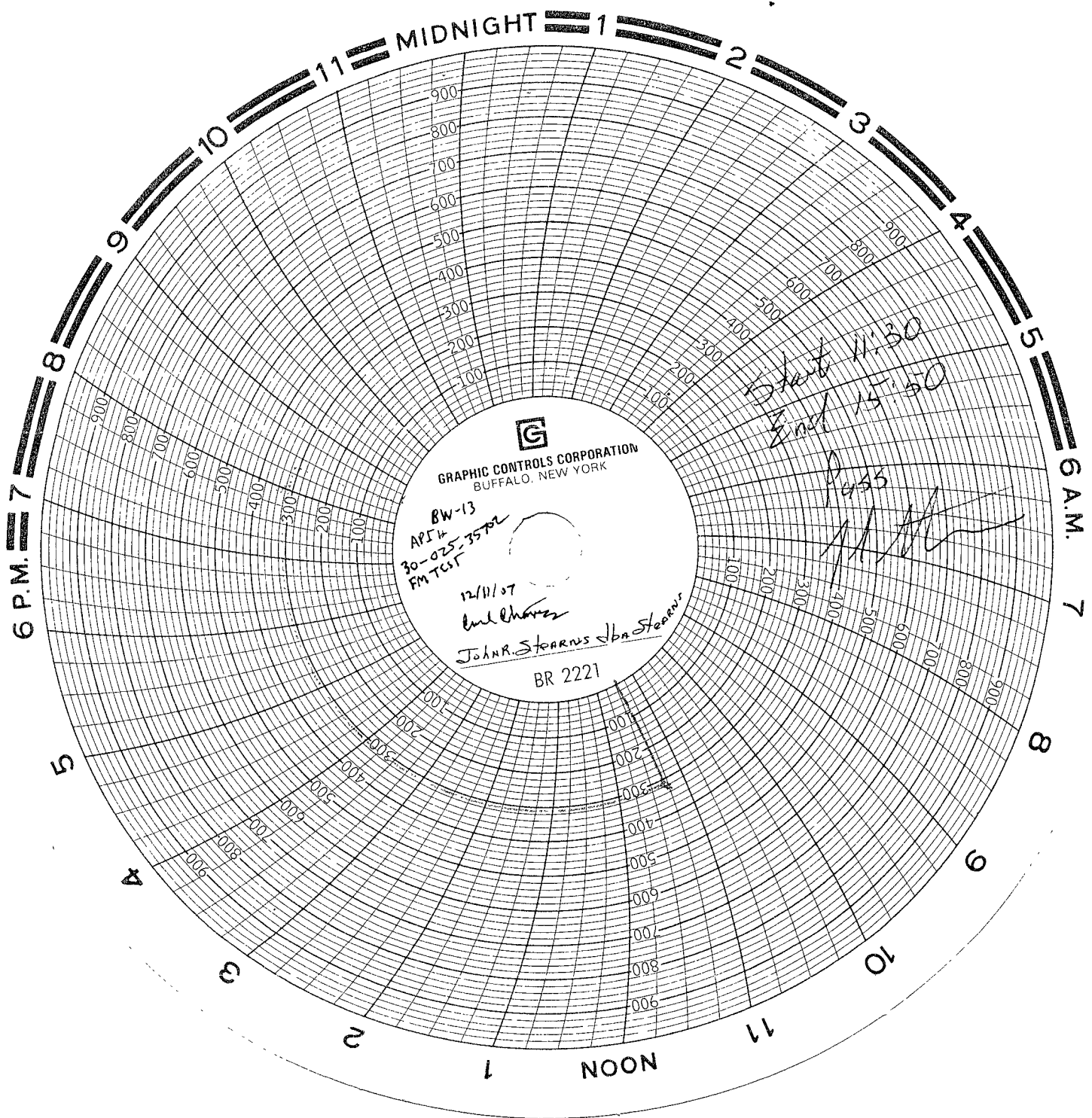
E-mail address: **johnr@stearns@aol.com** Telephone No. **505-675-2356**

APPROVED BY: **Chris Williams**
Conditions of Approval (if any):

OCD DISTRICT SUPERVISOR/GENERAL MANAGER

TITLE

DATE **DEC 27 2007**



GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

BW-13
APLH
30-025-3502
FM TEST

12/11/57

End Charles

John R. Stearns *John R. Stearns*

BR 2221

Start 11:30
End 15:50

Pass
[Signature]